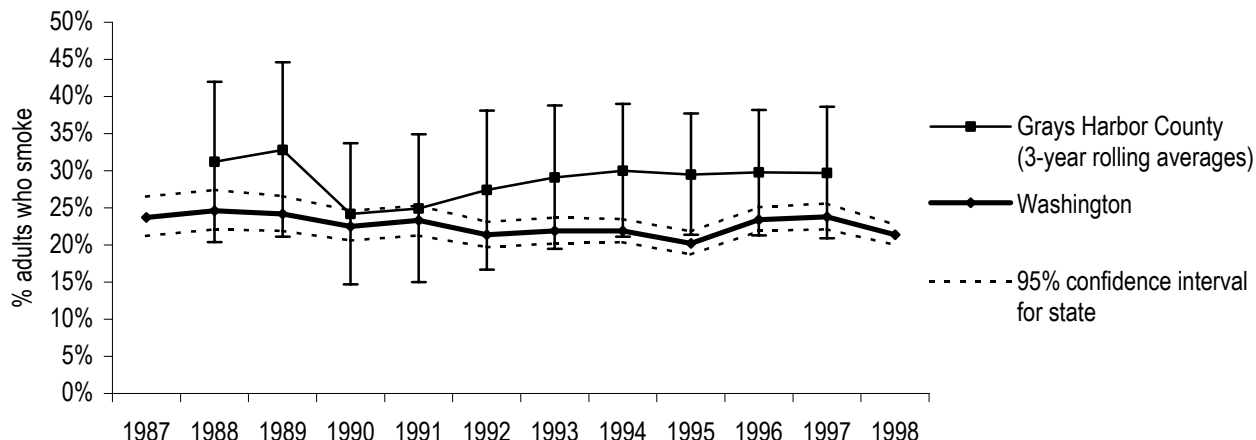


Grays Harbor County Population =71,800 (26% under age 18)

Adult Tobacco Use

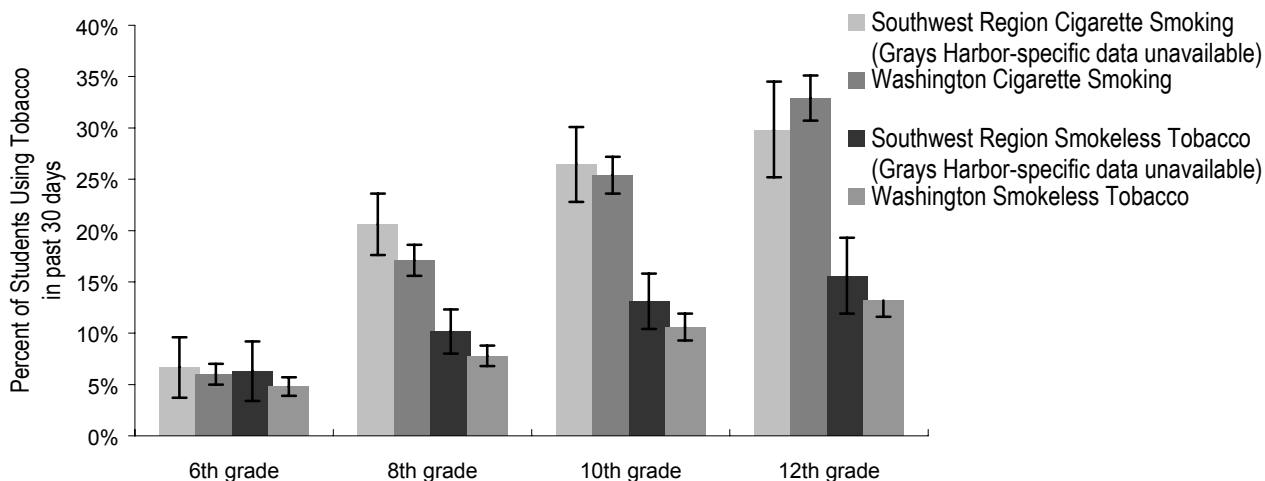
Current Cigarette Smoking (1987-1998)



Current Smokeless Tobacco Use (1993-1997)

	<i>Entire adult population</i>	<i>Males only</i>
Grays Harbor County	4.8% (95%CI:1.1,10.3)	8.8% (95%CI:2.8,20.0)
Washington State	2.9% (95%CI:2.5,3.8)	5.7% (95%CI:5.0,6.5)

Youth Tobacco Use (1998)

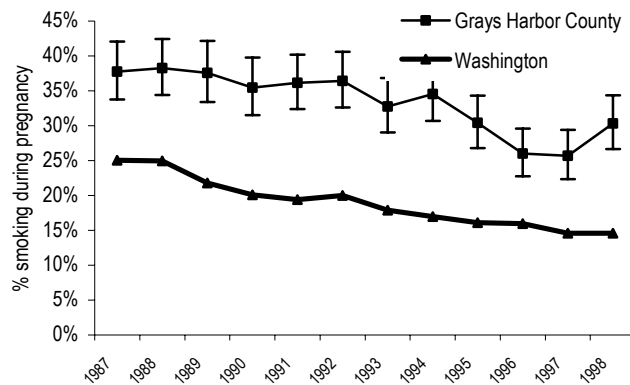


Summary of the problem

- ❑ Adult smoking is consistently elevated above, but not significantly higher than, the state rate. Nonetheless, Grays Harbor County is among the highest-risk counties for adult tobacco use in Washington.
- ❑ Youth tobacco use in the Southwest Region shows elevations above the state rate for cigarette use among younger age groups, but not among 12th graders; youth smokeless tobacco use is elevated for all age groups. An oversample of Grays Harbor County 8th graders in 1998 showed that 27.1% had smoked in the past 30 days, which is higher than the state and regional rates. More data collection is needed to completely describe tobacco use among Grays Harbor County youth.
- ❑ Maternal smoking during pregnancy is consistently and significantly higher than the state rate. Grays Harbor is among the highest risk counties in Washington for maternal smoking during pregnancy.
- ❑ Retailer compliance appears approximately the same as the state rate.

Estimated number of current adult and youth smokers who will die prematurely as a result of tobacco use: 5,500

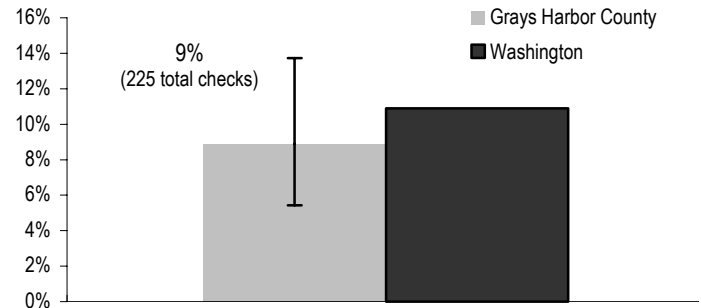
Smoking During Pregnancy (1987-1998)



Infants born annually to mothers who smoke during pregnancy: 229

Minors Access to Tobacco (1998-1999)

Percent Sales to Minors



Number of tobacco retailers in county: 169

Health at Risk (Estimated numbers for county)

Adults who currently smoke	15,500
Adults who currently use smokeless tobacco	1,500
Youth who currently smoke	1,500
Youth who currently use smokeless tobacco	700
ESTIMATED ANNUAL DEATHS DUE TO TOBACCO USE	150

Current Tobacco Prevention and Control Program Activities

Highlights during 1999

- ✓ Began training high school prevention team in Grays Harbor on health risks of tobacco.
- ✓ Facilitated a community assessment process and began development of a coordinated tobacco prevention plan for county.
- ✓ Created interactive display for community "Logger's Playday"; collected information from adult/youth tobacco users during event.

Annual Funding for Program (12-month funding amounts, FY 1999)

Source	Amount
Youth Access (Retailer License Fees)	\$ 13,975
CDC Grant	\$ 0
Total Per Capita Funding	\$.19

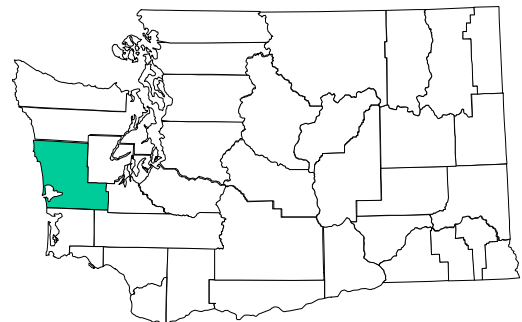
Agency receiving funding

Grays Harbor Public Health & Social Services

CDC Recommended Community Per Capita Funding: \$.70-2.00

Local Contacts

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TECHNICAL NOTES: (ADDITIONAL DOCUMENTATION IN APPENDIX B)

TOTAL DEATHS DUE TO TOBACCO USE ARE ESTIMATED AS 19% OF ALL DEATHS (MCGINNIS AND FOEGE 1993); "DUMBBELL" BARS AROUND DATA POINTS FOR SURVEY DATA REPRESENT 95% CONFIDENCE INTERVALS – THE TRUE VALUE MAY BE ANYWHERE WITHIN THE BARS, BUT MAY NOT BE EXACTLY AT THE DATA POINT; NUMBER OF ADULTS/YOUTH WHO WILL DIE PREMATURELY FROM TOBACCO USE IS ESTIMATED AS 33% OF CURRENT ADULT SMOKERS (MMWR 1996), AND 21% OF CURRENT YOUTH SMOKERS –WHO MAY 'GROW OUT OF' SMOKING BEHAVIOR (USDHHS 1994); "CURRENT ADULT/YOUTH TOBACCO USERS" ARE SYNTHETIC ESTIMATES BASED ON STATEWIDE AGE-SPECIFIC PREVALENCE; FUNDING LEVELS FOR COUNTIES WERE CALCULATED BASED ON DEDICATED YOUTH TOBACCO PREVENTION FUNDS AND CDC FUNDS MANAGED BY THE DEPARTMENT OF HEALTH – COUNTIES MAY SUCCESSFULLY SEEK ADDITIONAL FUNDING FOR TOBACCO CONTROL FROM OTHER SOURCES; "HIGHLIGHTS DURING 1999" WERE IDENTIFIED BY LOCAL PROGRAM STAFF; "CDC RECOMMENDED FUNDING" IS BASED ON *BEST PRACTICES FOR TOBACCO CONTROL PROGRAMS* (CDC 1999).